
Name

Address

City, State, Zip

Phone

Email

Check your email. You will receive information and documents at this email address.

I am Plaintiff/Petitioner Defendant/Respondent
 Plaintiff/Petitioner's Attorney Defendant/Respondent's Attorney (Utah Bar #: _____)
 Plaintiff/Petitioner's Licensed Paralegal Practitioner
 Defendant/Respondent's Licensed Paralegal Practitioner (Utah Bar #: _____)

In the District Justice Court of Utah
_____ Judicial District _____ County

Court Address _____

Plaintiff/Petitioner	Request to Submit for Decision (Utah Rule of Civil Procedure 7)
v.	<input type="checkbox"/> Hearing Requested
Defendant/Respondent	_____ Case Number
	_____ Judge
	_____ Commissioner (domestic cases)

- The Motion to _____ (name of motion) WAS filed on _____ (date).
- A memorandum opposing the motion was not filed was filed on _____ (date).
- A reply memorandum supporting the motion was not filed was filed on _____ (date).

4. A stipulation
[] was not filed [] was filed on _____ (date).
5. A hearing
[] has been requested [] has not been requested.
6. I request that the motion be submitted for decision because it is now ready for the court to review and issue a decision.

Plaintiff/Petitioner or Defendant/Respondent

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

Date

Signature ► _____
Printed Name _____

Attorney or Licensed Paralegal Practitioner of record (if applicable)

Date

Signature ► _____
Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Request to Submit on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
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Date

Signature ► _____

Printed Name _____